

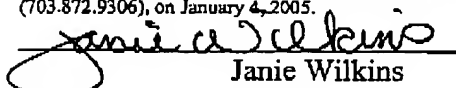
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Akito Kikuchi) Art Unit: 2872
Serial No. 10/646,170) Examiner: Juba Jr. John
Filed: August 22, 2003)
For: Mirror Drive Unit) Attorney Docket No. 44471/291424

RECEIVED
CENTRAL FAX CENTER
JAN 04 2005

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being transmitted to the
United States Patent Office Centralized Facsimile Number
(703.872.9306), on January 4, 2005.


Janie Wilkins
DATE: January 4, 2005

FIRST RESPONSE

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Office action dated October 1, 2004 in the patent application identified above, please enter the following amendments and reconsider the application in view of the appended remarks.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 4 of this paper.

**KILPATRICK
STOCKTON LLP**
Attorneys at Law

RECEIVED
CENTRAL FAX CENTER

JAN 04 2005

Suite 2800 1100 Peachtree St.
Atlanta GA 30309-4530
t 404 815 6500 f 404 815 6555
www.KilpatrickStockton.com

January 4, 2005

FAX

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
Centralized Fax Dept. GAU 2872 Examiner John Juba, Jr.	703.872.9306	U.S. Patent and Trademark Office Alexandria, VA 22313-1450

Brenda O. Holmes
FROM

10
PAGES (WITH COVER)

6559
REFERENCE NO

44471/291424
CLIENT/MATTER NO.

PLEASE CALL 404 815 6497 IF YOU HAVE DIFFICULTY WITH THIS TRANSMISSION.

CONFIDENTIALITY NOTE:

The information contained in this fax message is being transmitted to and is intended for the use of the individual named above. If the reader of this message is not the intended recipient, you are hereby advised that any dissemination, distribution or copy of this fax is strictly prohibited. If you have received this fax in error, please immediately notify us by telephone and destroy this fax message.

COMMENTS

Applicant: Akito KIKUCHI
Title: Mirror Drive Unit
Serial No./Docket No.: 10/646,170 44471/291424
Filed: 11/26/2002

PAPERS SUBMITTED:

- PTOSB/21 – Transmittal form;
- PTO/SB/22 – Petition for Extension of Time under 37 CFR 1.136(a) for FY2005 with authorization to charge deposit account for 1 month EOT (original & duplicate);
- PTO/SB/06 – Patent Application Fee Determination Record; and
- First Response in application to non-final Office Action of 10/01/2004.

Date: January 4, 2005
By: Brenda O. Holmes, Reg. No. 40,339

TO BE COMPLETED BY KS OPERATIONS CENTER

TRANSMISSION RECEIPT DATE/TIME: _____

COMPLETED BY: _____

JOB CODE

18528

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/646,170
	Filing Date	08/22/2003
	First Named Inventor	Akito KIKUCHI
	Art Unit	2872
	Examiner Name	John Juba, Jr.
Total Number of Pages in This Submission	Attorney Docket Number	44471/291424

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO/SB/06 - Patent Application Fee Determination Record
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	KILPATRICK STOCKTON LLP		
Signature	<i>Brenda O. Holmes</i>		
Printed name	Brenda O. Holmes		
Date	01.04.2005	Reg. No.	40,339

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO's Centralized Facsimile Number (703) 872.9306 on the date shown below.		
Signature	<i>Janie Wilkins</i>	
Typed or printed name	Janie Wilkins	Date 1/4/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.